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*To ensure access to high-quality,
patient-centered, cost-effective
health care to Los Angeles County
residents through direct services at
DHS facilities and through
collaboration with community and
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June 4, 2013

TO: Each Supervisor

FROM: Mitchell H. Katz, M.D. 
Director

SUBJECT: **STATUS REPORT ON KEY INDICATORS OF
PROGRESS, HOSPITAL OPERATIONS, AND OTHER
ISSUES RELATED TO THE TRANSITION TO THE NEW
LAC+USC MEDICAL CENTER – PROGRESS REPORT #88**

This is to provide your Board with the monthly report on the status of transitioning to the new LAC+USC Medical Center (LAC+USC). This report is the full monthly operational report with trends to include the month of April 2013.

Census Trending (ADC includes Psychiatric & Newborn Patients)

The Average Daily Census (ADC) for the month of April was 542 out of 676 licensed beds, an estimated 77% utilization rate (79% occupancy). The census for Medical/Surgical units was an estimated 86% utilization rate (88% occupancy) for April 2013.

Emergency Department (ED) Indicators

The attachment demonstrates a decrease in the following key indicators: average daily census (ADC), median ED boarding time, and the number of patients transferred out for this period. There was an increase in the rate of patients who left without being seen (LWBS). The Dangerously Overcrowding Level Comparison for this period remained the same as well as ED wait time.

If you have any questions or need additional information, please contact me or Dr. Christina Ghaly, LAC+USC Interim Chief Executive Officer, at (323) 409-2800.

CG:ab

Attachment

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

LAC+USC Medical Center
Operational Monitoring Report
Reporting Period: Apr 2013

Indicator	Definition	Data	Comments																																																										
Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics																																																													
1a. Average Daily Census (ADC)	<p>ADC: A measure of the total number of inpatients occupying licensed beds on a daily basis reported as the arithmetic mean.</p> <p>Calculation: Total number of admitted inpatients at 12:00 AM midnight daily, summed over the month and divided by the total number of days in the month.</p> <p>Source of Data: Affinity</p>	<p style="text-align: center;">ADC</p> <table><thead><tr><th>Month</th><th>ADC</th></tr></thead><tbody><tr><td>Jan '11</td><td>593</td></tr><tr><td>Feb '11</td><td>600</td></tr><tr><td>Mar '11</td><td>586</td></tr><tr><td>Apr '11</td><td>577</td></tr><tr><td>May '11</td><td>575</td></tr><tr><td>Jun '11</td><td>572</td></tr><tr><td>Jul '11</td><td>569</td></tr><tr><td>Aug '11</td><td>579</td></tr><tr><td>Sep '11</td><td>561</td></tr><tr><td>Oct '11</td><td>575</td></tr><tr><td>Nov '11</td><td>587</td></tr><tr><td>Dec '11</td><td>580</td></tr><tr><td>Jan '12</td><td>582</td></tr><tr><td>Feb '12</td><td>580</td></tr><tr><td>Mar '12</td><td>572</td></tr><tr><td>Apr '12</td><td>561</td></tr><tr><td>May '12</td><td>558</td></tr><tr><td>Jun '12</td><td>547</td></tr><tr><td>Jul '12</td><td>573</td></tr><tr><td>Aug '12</td><td>576</td></tr><tr><td>Sep '12</td><td>585</td></tr><tr><td>Oct '12</td><td>572</td></tr><tr><td>Nov '12</td><td>534</td></tr><tr><td>Dec '12</td><td>537</td></tr><tr><td>Jan '13</td><td>573</td></tr><tr><td>Feb '13</td><td>563</td></tr><tr><td>Mar '13</td><td>545</td></tr><tr><td>Apr '13</td><td>542</td></tr></tbody></table> <p>Note: Average Daily Census number reported includes Medical Center + Psych + Newborns Census.</p>	Month	ADC	Jan '11	593	Feb '11	600	Mar '11	586	Apr '11	577	May '11	575	Jun '11	572	Jul '11	569	Aug '11	579	Sep '11	561	Oct '11	575	Nov '11	587	Dec '11	580	Jan '12	582	Feb '12	580	Mar '12	572	Apr '12	561	May '12	558	Jun '12	547	Jul '12	573	Aug '12	576	Sep '12	585	Oct '12	572	Nov '12	534	Dec '12	537	Jan '13	573	Feb '13	563	Mar '13	545	Apr '13	542	<p>ADC provided as background information.</p> <p>Graphs depict data from January 2011 to present.</p>
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LAC+USC Medical Center
Operational Monitoring Report
Reporting Period: Apr 2013

Indicator #1 – Trends in Average Daily Census and Hospital Operations Metrics

**1b.
Occupancy
Rate
LAC+USC
Medical
Center**

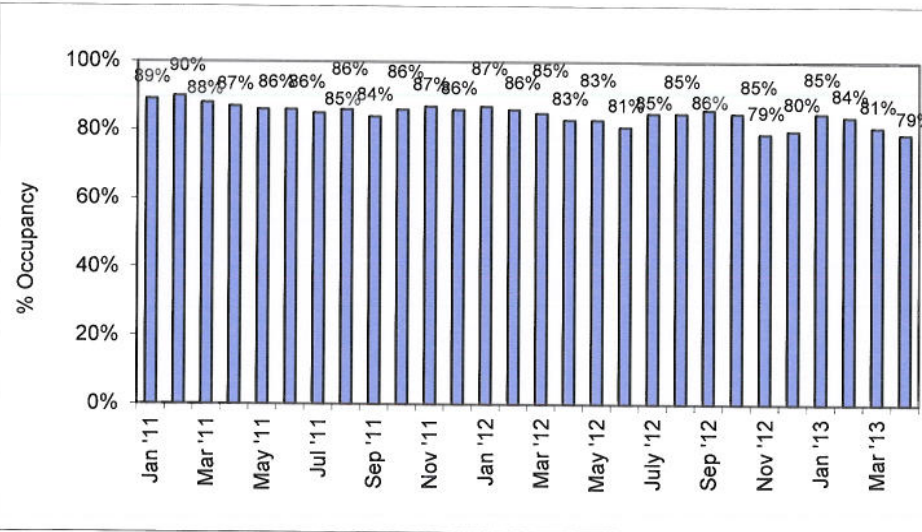
Definition:
A measure of the usage of the licensed beds during the reporting period that is derived by dividing the patient days in the reporting period by the licensed bed days in the reporting period.

Calculation:
The total number of admitted inpatients at 12:00 AM midnight, including women in labor, may include normal newborns and psychiatric inpatients divided by licensed or budgeted beds.

Source of Data:
Affinity

Target:
95%

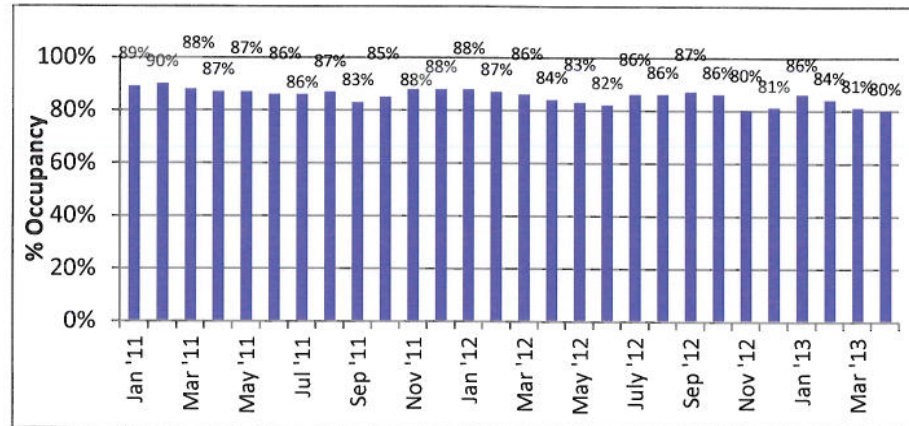
Medical Center Licensed Occupancy Rate (excluding Newborns) = **Med**
Center Census - Newborns / 600



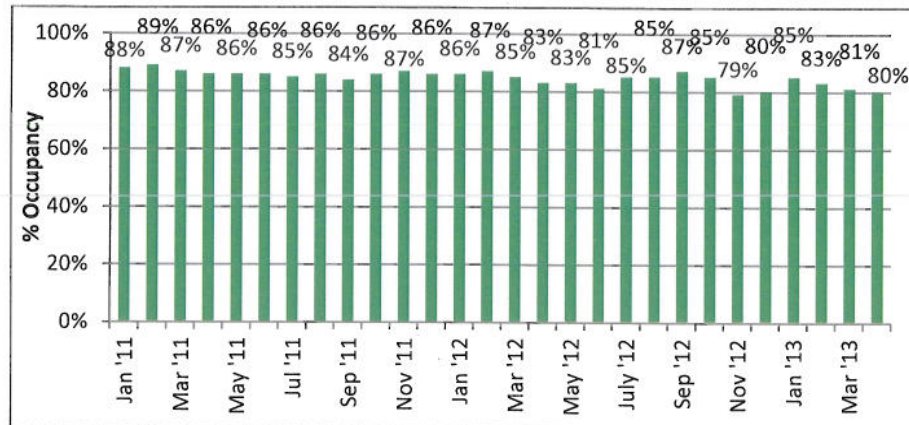
For comparison, occupancy rates reported in the old facility were reported including newborns and were based on budgeted beds.

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Operational Monitoring Report
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Medical Center Licensed Occupancy Rate (including Newborns) **Med Center Census/600**



Medical Center Budgeted Occupancy
Med Center Census + Newborns + Psych Hosp Census / 676



Medical Center = New Facility + Psychiatric Hospital

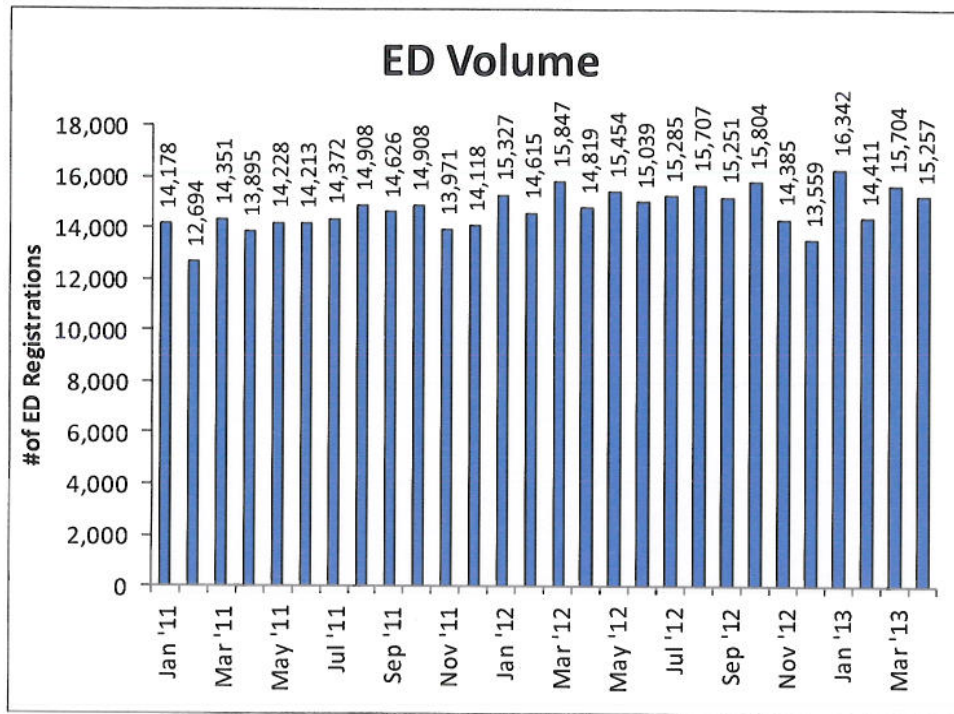
LAC+USC Medical Center
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Indicator #2 - Emergency Department Metrics

2a.
ED
Volume

ED Volume:
 Measured by total
 number of Emergency
 Department patient
 registrations.

Source of Data:
 Affinity



The annual total ED Volume for FY 10-11 was 164,700 which increased to 178,004 in FY 11-12. If the current increase in ED monthly volume is maintained, the annual total ED volume for FY 12-13 will surpass the FY 11-12 amount.

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2b.
Median
Emergency
Department
Boarding
Time
(EDBT)

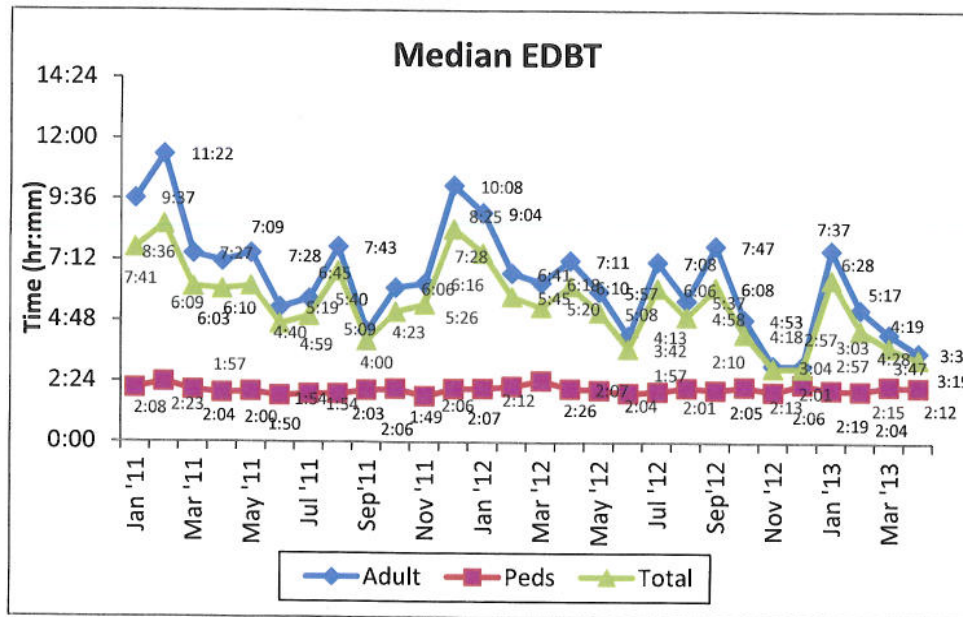
***Harris**
Rodde
Indicator

Boarding Time:
 Time from MD Admit
 time (effective date
 and time of pre-admit)
 to time the patient
 actually leaves the
 ED en route to
 assigned bed
 (effective date and
 time of the ED
 disposition).

Calculation:
 The middle value in
 the set of individual
 boarding times for the
 month arranged in
 increasing order. If
 there is an even
 number of values,
 then the median is the
 average of the middle
 two values.

Source of Data:
 Affinity

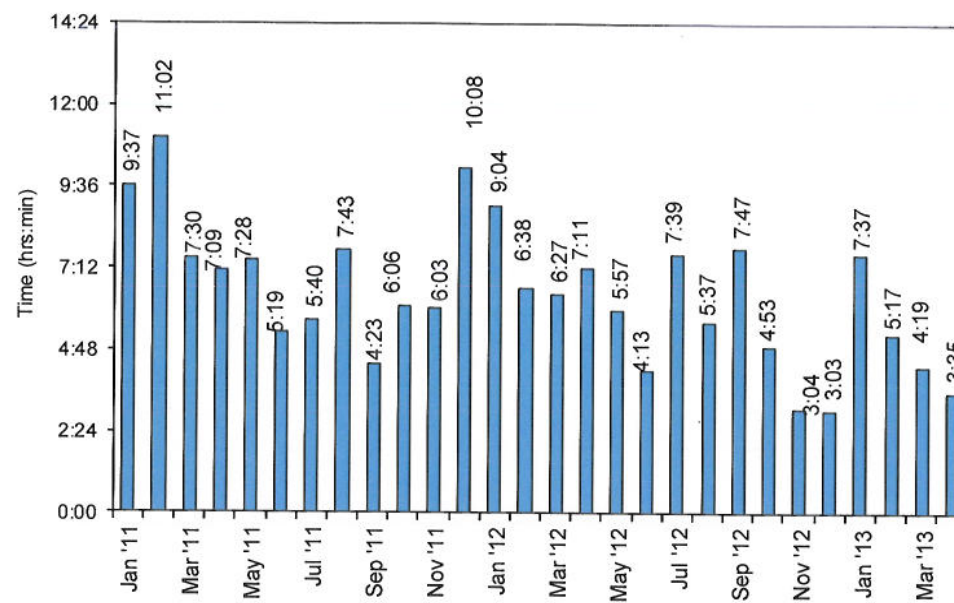
Target:
 Less than 7 hours.



Apr '13 data is Preliminary data

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Median Boarding Time (Adult)*



Apr '13 data is Preliminary data

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Indicator #2 - Emergency Department Metrics

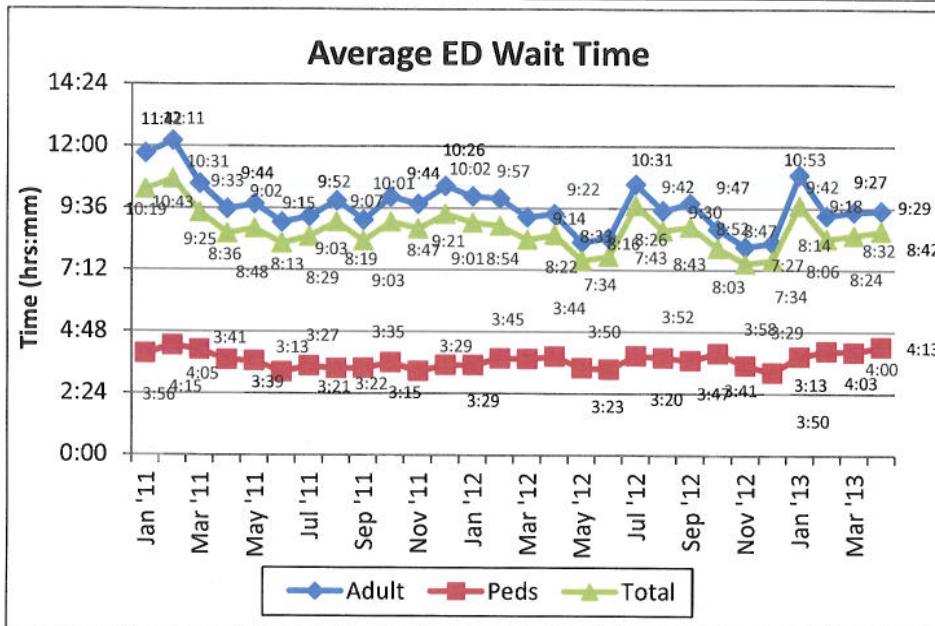
**2c.
ED Wait
Time**

ED Wait Time:
 Measured from time patient is triaged to time patient is either admitted or discharged reported as an arithmetic mean.

Definition:
 Sum of all wait time values during the monthly reporting period divided by the total number of values.

Source of Data:
 Affinity

Target:
 No target value.
 Lower numbers are better.



Adult Wait Time : *Excludes Psych, Pediatric, Observation Unit, and Jail patients

Total ED Wait time: *Excludes Psych, Observation Unit, and Jail

Apr '13 data is Preliminary data

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Operational Monitoring Report
Reporting Period: Apr 2013

Indicator #2 - Emergency Department Metrics

2d.
Left
Without
Being
Seen
(LWBS)

***Harris**
Rodde
Indicator

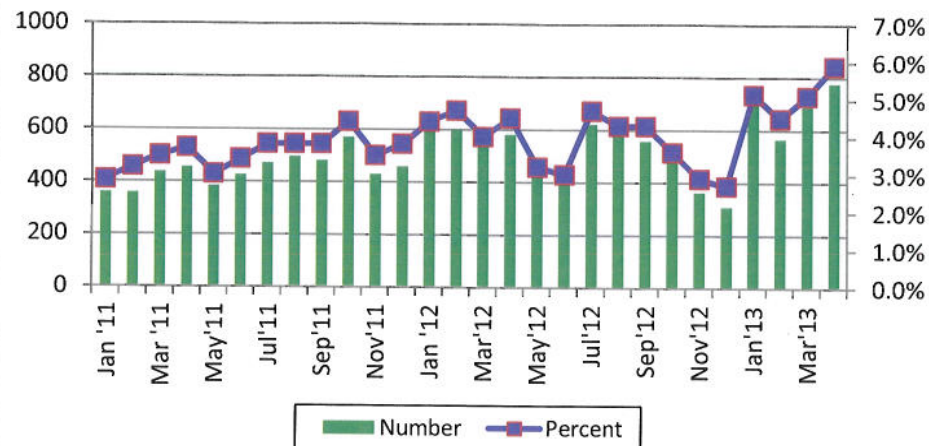
LWBS:
 The total number of patients who left the ED without being seen by a physician reported as a percentage of all ED visits.

Calculation:
 The total number of patients who left the ED without being seen divided by the total number of ED patient visits on a monthly basis.

Source of Data:
 Affinity

Target:
 No target value.
 Lower numbers are better.

Left Without Being Seen



Apr '13 data is Preliminary data

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Indicator #2 - Emergency Department Metrics

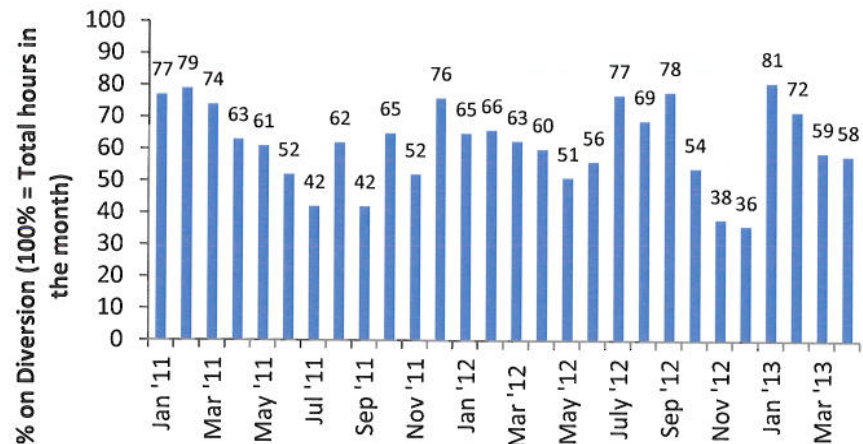
**2e.
ED
Diversion**

ED Diversion:
A percentage measure of the time the ED diverts ambulance traffic away from the ED, reported as a function of the reason for diversion on a monthly basis.

Calculation:
The total number of hours of ED diversion for a specific reason divided by the total number of available hours in a month.

Source of Data:
ReddiNet

Diversion of ALS Units due to ED Saturation

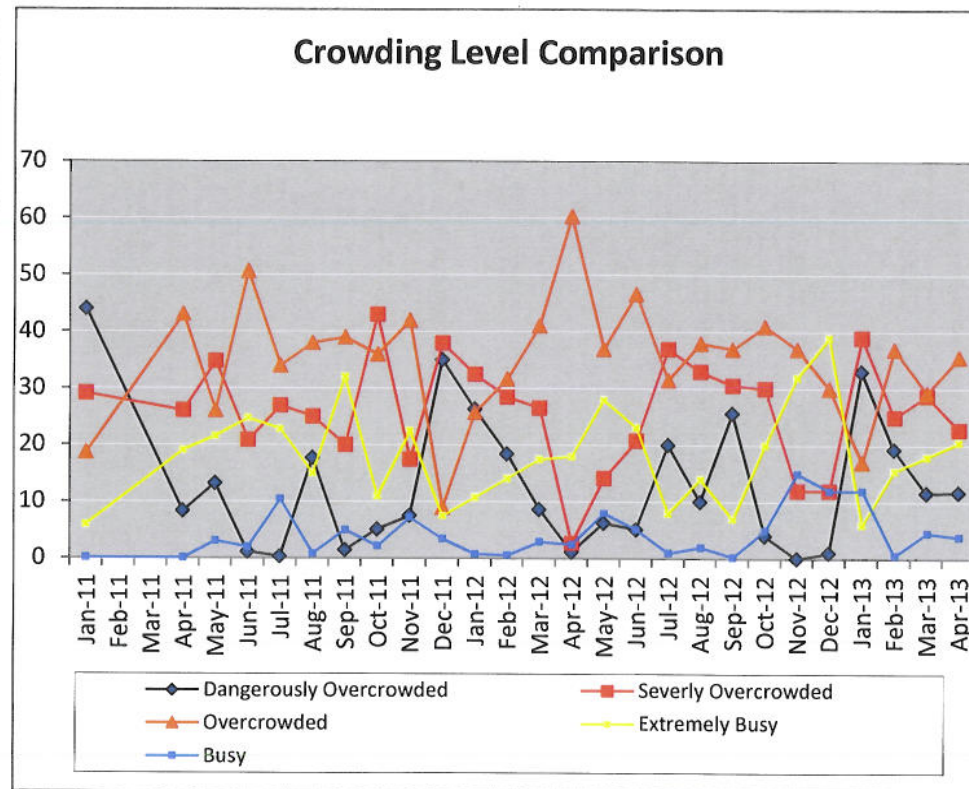


Key points:

-- Diversion is for paramedic runs only; Basic Life Support ambulances still arrive.
-- When diversion is requested but all hospitals in the area are on diversion, patients go to the closest hospital. Therefore, ambulances often arrive while "on diversion".

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2f.
Surge
Report



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Indicator #3 – Trends for Patient Diversions and Transfers & #4 – Transfers to Rancho Los Amigos Metrics

3. & 4.
Rancho
Los
Amigos
Hospital
(RLAH)
Transfers

Transfers:
The volume of patients transferred to RLAH for acute hospitalization from the Emergency Department and from Inpatient Units.

Data Source:
Manual record keeping.

Cancelled category includes patients whose condition changed leading to higher level of care or discharge home.

Month of Apr '13

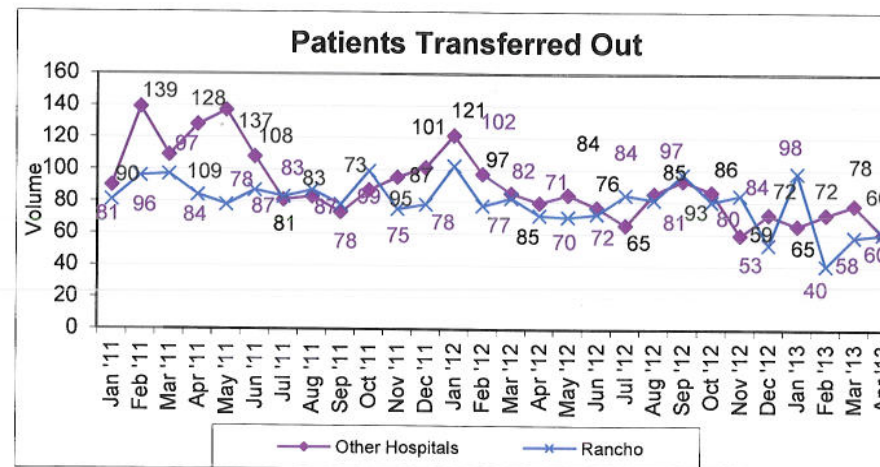
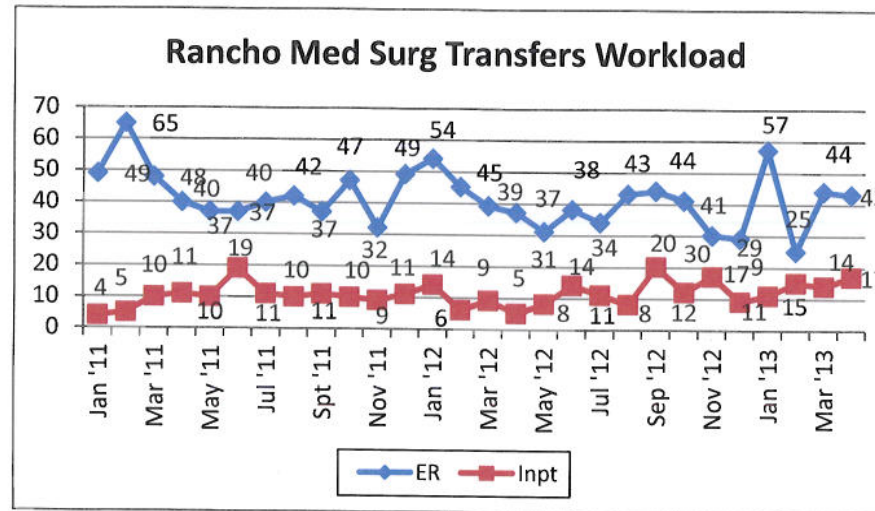
Referrals from ER:

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	22	NA	-
# Referred to RLAH	22	24	46
# Transfers	19	24	43
# Denied	1	NA	-
# Cancelled	2	NA	-
# Patients Refused of Those Cancelled	1	NA	-

Referrals from Inpatients:

	Med/Surg	Acute Stroke	Total
# Met transfer criteria	17	NA	-
# Referred to RLAH	17	2	19
# Transfers	15	2	17
# Denied	0	NA	-
# Cancelled	1	NA	-
# Patients Refused of Those Cancelled	0	NA	-
Other /Pending	1	NA	-

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* Other hospitals = Silver Lake (0), Managed Care Repatriation (60)
 Data was revised to reflect total # of patients (including stroke patients) referred to Rancho

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Indicator #5 – Harris Rodde Indicators

5.

Average Length of Stay (ALOS)

***Harris Rodde Indicator**

LOS:

The difference between discharge date and the admission date or 1 if the 2 dates are the same.

Total LOS:

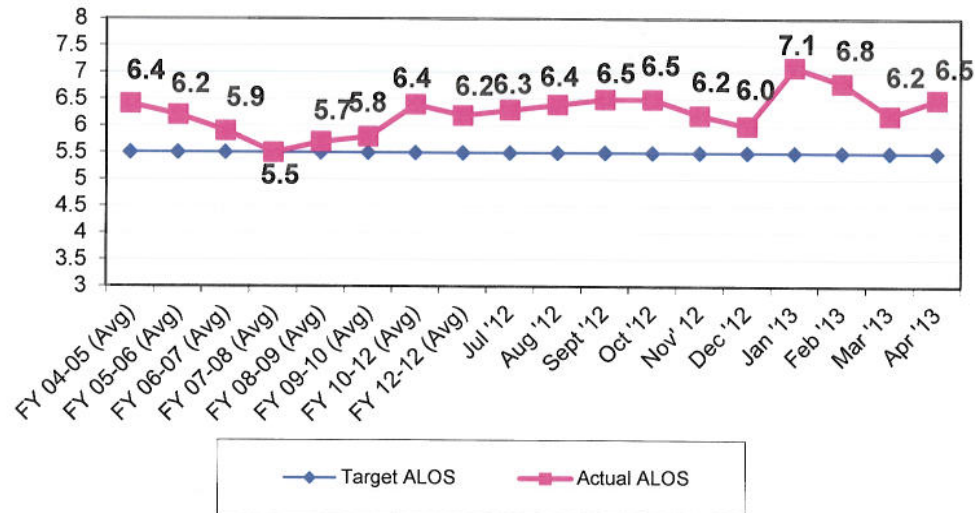
Calculation:

ALOS is the arithmetic mean calculated by dividing the Total LOS by the Total # of discharges in the monthly reporting period, rounded off to one decimal place.

Source of Data:
Affinity

Target: <5.5 days

Average Length of Stay



***Medical Center (New Facility + Psychiatric Hospital) ALOS - Preliminary data pending Auditor-Controller validation**

The increasing length of stay observed in January and February is largely attributed to the discharge of several patients with extended lengths of stay. In April 2013, these include 4 patients who were discharged with LOS > 100. Without the effect of these 4 patients, ALOS would have been 6.3 rather than 6.5.

*As of July 2010 with the consolidation of Ingleside and Hawkins, all psychiatric services are now included.

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Indicator #6 – Pediatric Metrics

6. Pediatric Bed Census and Occupancy (%) Pediatric ICU (PICU) Neonatal ICU (NICU) Pediatric Unit Adolescent Unit	Census: The total number admitted pediatric inpatients at 12:00 AM midnight of a designated pediatric ward. Occupancy: The total number of admitted pediatric inpatients divided by the total number of licensed beds on that unit and reported as percentage. Source of Data: Affinity	Date	NICU (40 Beds)	Peds Ward (25 Beds)	PICU (10 Beds)	Med/Surg Adolescent (20 Beds)
		Jan-11	55%	60%	70%	70%
		Feb-11	57%	68%	80%	80%
		Mar-11	57%	60%	70%	75%
		Apr-11	55%	64%	50%	75%
		May-11	57%	56%	50%	80%
		Jun-11	70%	52%	60%	75%
		Jul-11	58%	44%	50%	70%
		Aug-11	58%	44%	40%	75%
		Sep-11	58%	40%	50%	75%
		Oct-11	55%	52%	60%	70%
		Nov-11	62%	60%	70%	75%
		Dec-11	65%	40%	60%	70%
		Jan-12	60%	52%	60%	75%
		Feb-12	55%	56%	60%	70%
		Mar-12	55%	64%	50%	75%
		Apr-12	53%	48%	50%	65%
		May-12	42%	40%	50%	70%
		Jun-12	37.5%	44%	50%	60%
		Jul-12	45%	48%	60%	80%

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		Aug-12	57%	48%	50%	75%
		Sep-12	62.5%	56%	50%	80%
		Oct-12	57.5%	64%	60%	70%
		Nov-12	62.5%	44%	50%	45%
		Dec-12	72.5%	36%	60%	50%
		Jan-13	62.5%	48%	70%	70%
		Feb-13	50%	48%	70%	75%
		Mar-13	53%	44%	60%	75%
		Apr-13	53%	40%	50%	55%

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Operational Monitoring Report
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Indicator #7 – Med Surg / ICU / OB/GYN Metrics

7.
Med Surg / ICU
Bed Census
and Occupancy
(%)

Medical
Surgical Unit
(Med Surg)

Jail Unit (Jail)

ICUs (Excluding
Burn ICUs)

OB/GYN Unit
(Med Surg)

Census:

The total number admitted pediatric inpatients at 12:00 AM midnight of a designated pediatric ward.

Occupancy:

The total number of admitted inpatients divided by the total number of licensed beds on that unit and reported as percentage.

Source of Data:
 Affinity

Date	Med Surg (309 beds)	Jail (24 Beds)	ICUs (120 Beds)	Burn* (20 Beds)	OB/GYN (Med Surg) (32 beds)
Nov-12	87%	83%	83.5 %	51%	87%
Dec-12	88%	71%	83%	44%	83%
Jan-13	95%	73%	85%	55%	98%
Feb-13	93%	59%	87%	61%	95%
Mar-13	91%	62%	82%	47%	93%
Apr-13	88%	82%	85%	57%	99%

* Burn= Both ward (10) and ICUs (10)